## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
WOMEN VOTE!	C C00473918
	M M / D D / Y Y Y Y
Check if 24-hour report 48-hour report New report Amends report filed	
Full Name of Payee SKDknickerbocker	Date of Public Distribution/Dissemination
Estimate	06 16 2014
Mailing Address 1150 18th Street, NW	Amount
Ste 800 City State Zip Code	33000.00
Washington DC 20036	Transaction ID : SE-6206
Purpose of Evnanditure	Date of Disbursement or Obligation
Media Production  Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	Sought: House District:
Thom Tillis Oppose	President State: NC State:
000000 00	rrsement For: Primary General
Per Election for Office Sought 688898.00 2014	Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	Amount
City State Zip Code	
Purpose of Expenditure Category/	Date of Disbursement or Obligation
Type	
Name of Federal Candidate Support Office	e Sought: House District:
Oppose	President Senate State:
Galorida Todi To Bato	ursement For: Primary General
Per Election for Office Sought	Other (specify) -
(a) SUPTOTAL of Hamized Independent Evrenditures	22000.00
(a) SUBTOTAL of Itemized Independent Expenditures	33000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
	4 4
(c) TOTAL Independent Expenditures	33000.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Caroline Fines	M / D D / Y Y Y Y
CDI II THE II	6 18 2014
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